STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
1. NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Norm Dicks fo	r Congress			
ADDRESS (number and	PO Box 1663		<u> </u>	
(Check if address is changed)	1			98401 _ _
		CITY▲	STATE▲	ZIP CODE 📥
(Check if address is changed)	L ADDRESS (Please provide only one norm@normdicks.			
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0.5	24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00037606		
4. IS THIS STATEM	IENT X NEW (N) OR	AMENDED (A))	
I certify that I have exami	ned this Statement and to the best of my k Treasurer Herb Simon	nowledge and belief it is true, corre	ect and complete	
Signature of Treasurer	Electronically Filed by Herb Sir	non	Date 05	24 2010
NOTE: Submission of fa	lse, erroneous, or incomplete information n	nay subject the person signing this	•	
Office Use Only		For further informat Federal Election Con Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)